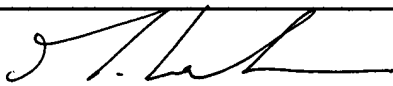


## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number: <input type="text"/>				OR <input checked="" type="checkbox"/> Correspondence address below	
Name Steven W. Webb					
Address Law Offices of Steven W. Webb					
City Encinitas		State CA		ZIP 92024	
Country USA		Telephone 760-635-7530		Fax 760-635-7531	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Michael			Family Name or Surname Lehman		
Inventor's Signature 				Date 7-30-04	
Residence: City Del Mar		State CA		Country USA	
Citizenship USA					
Mailing Address 12933 Caminito Bodega					
City Del Mar		State CA		ZIP 92014	
Country USA					
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])			Family Name or Surname		
Inventor's Signature				Date	
Residence: City		State		Country	
Citizenship					
Mailing Address					
City		State		ZIP	
Country					
<input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					